

WALDEMAR MEDICAL RESEARCH FOUNDATION, INC.

Waldemar Road & Sunnyside Boulevard, Woodbury, L. I., New York Telephone: 516-GE 3-2500

JAN 18 1963 January 13 1965

مناعث

Dr. Michael E. De Bakey Professor and Chairman, Department of Surgery Baylor University College of Medicine Houston, Texas

Dear Dr. DeBakey:

I have read the first published report of the President's Commission on Heart Disease, Cancer and Stroke and reacted with admiration to the intensive and careful analysis that has been made and to the braod and reasonable program which is being formulated. The task ahead is formidable but the goals and results well deserve the effort to be made. I was particularly interested in some of the goals set forth because I have been working towards similar ends in our own institution here in Long Island.

I enclose a copy of a memo I have sent to the President's Commission. We desire to assist in any way to assure the success of the President's Program.

Norman Molomut, Ph.D. Scientific Director

NM/vs

Enc.



WALDEMAR MEDICAL RESEARCH FOUNDATION, INC.

Waldemar Road & Sunnyside Boulevard, Woodbury, L. I., New York Telephone: 516-GE 3-2500

January 5, 1965

SUBJECT: Report of the President's Commission on

Heart Disease, Cancer and Stroke, Vol. I,

'A National Program to Conquer Heart Disease,

Cancer and Stroke."

FROM: Norman Molomut, Ph. D.

Scientific Director

The outline of the program for regional center, sub-stations and the objectives set forth in the above report prompt us to inquire concerning how our institution and its staff may participate in this overall program with respect to cancer.

Brief Background. The Waldemar Medical Research Foundation founded in 1947 as a private, non-profit institution has since that time been engaged in research into the nature of the cancerous diseases. For almost a decade its work has mainly been concerned with animal and cellular experimentation. In 1956, when the Waldemar Cancer Research and Prevention Center was conceived, the goals and programs set forth were similar to those contained in the report of the President's Commission. (See appended excerpt from our 1960 annual report.) We believed if we could expand our facilities for research, education and add a diagnostic research and service facility, we would be able to function as an area center in cancerous diseases. Our fundamental studies in the biology and biochemistry of cancer were to be increased by the addition of senior scientific personnel and technical assistants; the educational programs were to be expanded to include college students in preparation for graduate degrees in the life sciences, (selected graduate students from local universities with whom we have an affiliation) the addition of a cancer detection facility in which investigations on improved diagnostic methods in cancer, education for the practicing physician and dentist at the post-graduate level, training for professional personnel by including them in the services performed at the detection center; and, finally the possibility of establishing a regional cancer registry in which it was hoped all of the local community hospitals would participate.

In 1956 when we embarked on this long-range program, there were no available funds from government sources for this specific purpose. Therefore, we planned the achievement in slow stages depending to a small degree for our basic research funding on government and private foundation grants, and the remainder to come from the local community. This necessitated an educational activity among the people of Long Island to bring them closer to our institution so that they would support it with the necessary contributions. Barring any unforeseen events and

Notes on the Report of the President's Commission

VEDPO

- 2 -

January 5, 1965

obstacles we had planned that the period 1956-1960 would be required for an intense community educational and public relations program; 1960-1962 would be spent acquiring additional staff personnel, funds for the construction of a larger facility, including the clinical cancer detection and teaching portion; and finally 1962-1964 the building site would be acquired, funding by private and government grant be obtained, and construction started, with the objective of completion in 1964.

This time schedule was adhered to. In the early months of 1964 we moved from Port Washington to the almost completed new research facility and cancer prevention center in Woodbury. Located on 10 acres of land, at the present time we have a laboratory of 30,000 square feet, devoted to basic research.

The next phase of our planned approach to becoming a central cancer research and service facility for our area which we had hoped to embark upon during the period 1964-1970 was: an increase in our scientific staff and the consequent in L crease in the basic researches being conducted; the increased facilities available would help to expand our educational programs for students at the undergraduate college and high school levels, for science teachers and for master's and doctoral students in the life sciences. With the establishment of our cancer detection facility and the employment of local physicians in staffing the work, we had hoped also to increase our program of professional education and training through the use of formal post-graduate courses in cancer and the training of physicians in the early diagnosis of cancer by their participation in the cancer detection facility, and lastly the use of the cancer detection facility for mounting a program of investigation for the improvement in the techniques of cancer diagnoses and their rapid dissemination to the professional community. By 1968 we planned to begin work on the design and construction of a clinical facility with in-patient beds as the nucleus of a treatment center. It was hoped that this treatment center would have 25 to 30 beds with 12 - 15 set aside specifically for clinical experimentation in cancer management therapy and rehabilitation and also provide both in-patient and out-patient care, particularly in connection with investigations being conducted by the scientific staff.

The announcement and report of the President's Commission on Heart Disease, Cancer and Stroke is indeed encouraging in that it may now be possible for us to follow through on our program since it so closely parallels and conforms to

Notes on the Report of the President's Commission

January 5, 1965

the objectives set forth by the President's Commission. To this end, we would like to engage in discussions with the appropriate personnel and committees in order to present our staff, facilities, and program for consideration by the Commission in considering our facility and group as a regional center or, if that is too ambitious, one of the 200 stations recommended in the program.

- 3 -

We believe that the Long Island community consisting of Nassau and Suffolk counties, and containing well over two million people, with a rapid growth rate so that the anticipated total population will be even greater within the next five years, and in a state which has the highest cancer morbidity and mortality, is a suitable area for a central cancer facility.

We wish to emphasize that it is not our intent to preempt this work as a central group, but rather it is our desire to provide the inspiration, guidance and facilities and act as the crystallization point for cooperation among the many private and community hospitals in our area, the growing universities in both Nassau and Suffolk counties, and the professional community which for so many years has lacked a soundly based program of professional education and training, except that which is provided in the residency programs of the community hospitals in the area.

We believe also that such a center can provide not only as a tumor registry, but what we have termed a "cancer therapy profile" in which the registered cancer cases and a complete summary of the therapeutic modalities employed, results obtained, and ultimate fate of each case, can be recorded and collated. This therapy profile might then be valuable in individual cases since, if all of the factors and diagnoses of cancer type, are presented to the date processing machinery, the pertinent cases of similar background and history would then be made available for review of the therapies employed in order that a therapeutic regime may be chosen based upon the experience of previous cases and their results.

It is respectfully requested that we be permitted to meet with members of the Commission and given the opportunity to prepare a detailed presentation in order that the Waldemar Cancer Research and Prevention Center be considered as one of the centers in the overall national program being planned for the coordinated attack on the cancerous diseases.

Respectfully,

Norman Molomut, Ph. D. Scientific Director